**Covid19 -Preparedness Checklist for Service Providers**

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|  | **MANAGEMENT PROCESSES- List C** |
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|  | Fortis consulting  April 2020 |

**INTRODUCTION**

***This checklist covers the first phase of the Business Continuity and Resilience Framework- Preparedness from a Management Process perspective.***

Ensuring your **Business Resilience and Continuity** is important to us. We have hence developed a **COVID-19 Resilience and Continuity** **Framework in three key organisational areas**to help you navigate successfully through this time of crisis and to minimise disruption. The information contained in this framework is of a general nature and should be considered in line with relevant advice from state and national authorities

This checklist covers the first phase **Preparedness** in **Key area 3: Management Processes**

**Preparedness**

**Response**

**Recovery**

Call us on **+61 8 9467 2490** or email us on[**info@fortisconsulting.com.au**](mailto:info@fortisconsulting.com.au)to discuss any support we can provide around **Response** and **Recovery to optimise your current Management Processes to manage Covid-19.**

1. **Communication List C.1.1**

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| Area | Preparedness Checklist – Management Processes | Assessment | Comment |
| C.1.1.1 | * Have you assigned a Communication Coordinator to monitor public health alerts and update the Coronavirus (COVID-19) EMT, staff, volunteers, consumers and other key stakeholders? | □ Yes □ No |  |
| C.1. 1.2 | * Have you compiled a contact list for the state health department and other relevant stakeholders (f.e. WA DoH, GPs, infection control consultants, allied health, referral hospitals, ambulance, laboratories, suppliers, contractors (e.g. cleaners etc), pharmacies, funeral service providers, ambulance, other key local social and community support groups (CALD, ATSI, LGBTQI) etc) and ensured it is kept up to date and readily available (electronic and hard copy)? | □ Yes □ No |  |
| C.1. 1.3 | * Have you developed a process to regularly communicate with and receive enquiries before, during and after an outbreak from   + your board ( e.g. weekly skype, team view, zoom meetings giving update on Business Continuity issues and discussing risk assessments)   + staff and volunteers (e.g. regular staff meetings, signs in staff areas, email updates etc)   + consumers/participants and their family members and   + other external key stakeholders such as suppliers, contractors, government agencies etc   Note: consider the following potential   * + communication topics: overview of emergency management situation, recognising symptoms, preventing infection (e.g. hand hygiene, respiratory etiquette etc), care options according to severity of illness, information about quarantine and isolation, encouraging routine vaccination, seasonal influenza etc)   + communication channels: culturally appropriate information posters/signs, social media, phone/text, email updates, on-hold recorded telephone message, website updates- | □ Yes □ No |  |
| C.1.1.4 | * Have you established appropriate and effective communication channels with these internal and external stakeholders? | □ Yes □ No |  |
| Standby\* | | | |
| C.1.1.5 | * Does your Communication Plan include the timely and culturally appropriate communication of information of significant changes in f.e. visiting arrangements, new infection control measures (such as changes in access to the facility etc) to consumers, family members and other relevant stakeholders? | □ Yes □ No |  |

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1. **Human Resource Management List C.1.2**

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| Area | Preparedness Checklist – Management Processes | Assessment | Comment |
|  | **WORKFORCE COORDINATION** |  |  |
| C.1.2.1 | * Have you designated a staff member to HR Covid-19 Coordinator to manage rosters, staff availability, and potential risks to staff health and wellbeing and report back to the EMT? | □ Yes □ No |  |
| C.1.2.2 | * Have you documented your personnel requirements? For example: are your services provided by paid staff, volunteers, contractors? | □ Yes □ No |  |
| Standby\* | | | |
| C.1.2.3 | * Do you have a **Staffing Contingency Plan** displaying different scenarios different % of staff (permanent and temporary), locum, volunteers unable to present for work due to illness, self-isolation, quarantine etc?   Note: Consider:   * + Minimum number and priority roles of staff/volunteers needed to keep the service open on any given day   + Whether closure of the service or recruitment of temporary staff/volunteers may be necessary in the event of a staffing crisis •   + Options for sharing workloads/taking on new roles or responsibilities in case of staff/volunteers illness or unavailability, and what staff training this may require   + Potential demands on staff//volunteers during a Coronavirus (COVID-19) outbreak and the stress this may cause   + Redeployment to alternative roles such as phone calls to consumers who are unwell at home, monitoring daily staffing and updating supervisors, contacting families of any concerns or emergencies, completing paperwork etc. | □ Yes □ No |  |
| C.1.2.4 | * Have you identified potential sources of additional staff/volunteers for Coronavirus (COVID-19) surge (e.g. recently retired, casual staff, agency/locum staff) and addressed any administrative needs (e.g. indemnity, provider numbers)? | □ Yes □ No |  |
| C.1.2.5 | * Have you considered planning training sessions for staff//volunteers in alternative roles (if required) to enable sharing of workload in case of staff illness or unavailability? | □ Yes □ No |  |
| C.1.2.6 | * Have you considered introducing provisions for staff/volunteers at increased risk of serious illness (e.g. pregnant women, people who are immunocompromised) during a Coronavirus (COVID-19) response e.g. leave arrangements, alternative duties/work location)? | □ Yes □ No |  |
| C.1.2.7 | * Have you developed processes for **managing staff illness**,(e.g. Payroll -nominate 2 other people to do payroll in event of sickness, ensuring staff absence during illness - in the event of being unable to attend the workplace, payroll can work from home etc) and when **staff may return to work** after recovering (State/national health authorities may provide specific advice during a Coronavirus (COVID- 19) outbreak, such as how long infected or exposed staff should be away from work)?   Note: Keep a record of staff members who have recovered from COVID-19 and therefore may be immune | □ Yes □ No |  |
|  | * Have you ensured staff know whom they should contact if they are unwell or are unable to come to work, and provided that person’s contact details to all staff? | □ Yes □ No |  |
| C.1.2.8 | * Have you encouraged staff/volunteers to develop their own culturally appropriate family Coronavirus (COVID-19) emergency plan for care of dependent children and elders in the event of illness or community containment measures (e.g. home-schooling)? | □ Yes □ No |  |
| C.1.2.9 | * Have you developed a plan for allocating staff to the care of consumers that could be affected by the virus (e.g. specific staff assigned to consumers/participants in isolation or cohorts of affected consumers/participants) | □ Yes □ No |  |
| C.1.2.10 | * Have you considered planning Covid-19 focused and culturally appropriate training sessions for staff//volunteers to deliver services to consumers/participants that might be in isolation or quarantine? | □ Yes □ No |  |
|  | **TRAINING AND EDUCATION** |  |  |
|  | * Have you designated a person to coordinate and maintain records of Coronavirus (COVID-19)-related education and training activities? | □ Yes □ No |  |
|  | * Have you provided education and online training to all staff/volunteers on Coronavirus (COVID-19)-related topics such as:   + Signs and symptoms of Coronavirus (COVID-19) illnesses   + Hand hygiene   + Standard precautions, transmission-based precautions (contact, droplet, airborne)   + Appropriate use of PPE   + Decontamination and cleaning of areas and equipment   + Quarantine and isolation protocols   + Notifiable disease reporting   Note: Keep records of training, particularly training relating to infection prevention and control. | □ Yes □ No |  |
|  | * Did you ensure that all staff/volunteers are aware of relevant resources and information sources (e.g. COVID-19 Business Continuity Plan and its ensuing emergency response plan, WA Health website and public health alerts, Australian Government Department of Health website , ACQSC website, NDIS Quality and Safeguards Commission’s website etc) | □ Yes □ No |  |
|  | * Did you provide culturally appropriate information materials (e.g. posters) for staff//volunteer and consumers/participants? | □ Yes □ No |  |
|  | * Did you ensure that all staff/volunteers are aware of the health service’s Coronavirus (COVID-19) Business Continuity programme, and perform testing of the plan f.e. through a staff training day using Coronavirus (COVID-19)-related scenarios? | □ Yes □ No |  |
|  | * Have staff/volunteers read and understood the relevant policies and processes related to identifying and managing a Covid-19 outbreak? | □ Yes □ No |  |
|  | * Did staff and volunteers receive online training, relevant to their role, on how they are to control infection and prevent disease transmission? | □ Yes □ No |  |
|  | * Have you provided consumers/participants families with culturally appropriate information regarding prevention of transmission? | □ Yes □ No |  |

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1. **Financial Management- List C.1.3**

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| Area | Preparedness Checklist – Management Processes | Assessment | Comment |
| C.1.3.1 | * Have you designated a staff member to Covid-19 Emergency Finance Coordinator? | □ Yes □ No |  |
| C.1.3.2 | * Have you prepared different scenarios/forecast costing for your Business Continuity programme? | □ Yes □ No |  |
| C.1.3.3 | * Have you documented the list of equipment required for your business to function on a day to day basis e.g. cars, computers, specialised equipment? | □ Yes □ No |  |
| C.1.3.4 | * Have you established how many payroll periods can you meet with no income? | □ Yes □ No |  |
| C.1.3.5 | * Have you identified how many vendors will get paid? Which ones? | □ Yes □ No |  |
| C.1.3.6 | * Do you have a cash reserve? How long can it keep your business running without any further income? | □ Yes □ No |  |
| C.1.3.7 | * Have you determined your Recovery Point Objective (RPO -the point in time when your business expects to be back in operation, at your discretion (it could be immediate, or it could be extended) for each of your core services that you want running again? | □ Yes □ No |  |
| C.1.3.8 | * Have you defined your budget to purchase any equipment that would be critical in the event of an interruption? | □ Yes □ No |  |
| C.1.3.9 | * Have you determined your minimum resource requirements to be operational below (People, IT and Information, Material, Equipment, Facilities, Cash etc)? | □ Yes □ No |  |

1. **PPE and Infection Control-Environment- List C.1.4**

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| Area | Preparedness Checklist – Management Processes | Assessment | Comment |
| C.1.4.1 | * Have you nominated a person to be responsible for overseeing infection control measures, as well as frequency of cleaning, liaison with contractors or hiring extra cleaners as necessary? | □ Yes □ No |  |
| C.1.4.2 | * Have you ensured standard infection control procedures are in place? | □ Yes □ No |  |
| C.1.4.3 | * Have you ensured that all staff /volunteers are trained in use of personal protective equipment (PPE) and infection control procedures? | □ Yes □ No |  |
| C.1.4.4 | * If applicable, have you reviewed your infection control processes during transport, e.g. through training of drivers on use of PPE, ensuring vehicles are equipped with supplies such as tissues, hand gel and masks, vehicle cleaning processes? | □ Yes □ No |  |
| Standby\* | **INFECTION CONTROL-FACILITY** |  |  |
| C.1.4.5 | * Have you ensured hand hygiene facilities are available in all key areas especially entry and exit points to areas? | □ Yes □ No |  |
| C.1.4.6 | * Have you displayed language-appropriate signage on cough etiquette and hand hygiene? | □ Yes □ No |  |
| C.1.4.7 | * Have you identified dedicated areas for potentially infectious staff/volunteers? | □ Yes □ No |  |
| C.1.4.8 | * Have you identified ways in which the facility will reduce the risk of transmission through isolation or cohorting (i.e physically separate residents that are virus affected from other residents) during an outbreak? | □ Yes □ No |  |
|  | **CLEANING/WASTE** |  |  |
| C.1.4.9 | * Have you ensured that surface that are frequently touched e.g. handrails, door handles are cleaned regularly (at least daily)? | □ Yes □ No |  |
| C.1.4.10 | * Have you provided non-touch (e.g. foot pedal) bins to facilitate easy disposal of waste such as used tissues? | □ Yes □ No |  |
| C.1.4.11 | * Have you performed fit testing of masks for all relevant staff ? | □ Yes □ No |  |
| C.1.4.12 | * Have you established review of cleaning practices, and implement regular, scheduled cleaning of frequently touched objects and services (several times a day, or when visibly soiled)? | □ Yes □ No |  |
|  | **PPE STOCK** |  |  |
| C.1.4.13 | * Have you stockpiled supply of necessary equipment and PPE, including gloves, gowns, masks, eye protection, tissues, hand hygiene resources and; perform regular expiry date checks?   Note: Aged care providers that require PPE must email agedcarecovidppe@health.gov.au for all requests. | □ Yes □ No |  |
|  | * Have you established a system to monitor stock levels of PPE, and implement measures to reduce opportunities for theft? | □ Yes □ No |  |
|  | **VACCINATION** |  |  |
| C.1.4.14 | * In collaboration with the Covid-19 Emergency Coordinator for HR and the Communication Coordinator, have you ensured Staff/volunteer Immunisation is up to date and seasonal influenza immunisations given according to National Guidelines? | □ Yes □ No |  |
| C.1.4.15 | * Have you made sure you can vaccine your staff/volunteers against COVID-19 strain when one becomes available? | □ Yes □ No |  |
|  | **EALRY IDENTOFICATION OF INFECTION** |  |  |
| C.1.4.16 | * Do you have a process in place to work with the Covid-19 Emergency Coordinator for Service Delivery to routinely check consumers for respiratory illness, particularly for fever or cough (with or without fever)? |  |  |
| C.1.4.17 | * Do you have a process in place to work with the Covid-19 Emergency Coordinator for HR to encourage staff to report COVID-19 symptoms should they occur? |  |  |
| C.1.4.18 | * Do you have a process in place to work with the Covid-19 Emergency Coordinator for Service Delivery and the Communication Coordinator, to notify the EMT and the state/territory Department of Health as soon as practicable (and within 24 hours) should a COVID-19 case be suspected? |  |  |

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1. **IT and Information Management**

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| Area | Preparedness Checklist – Management Processes | Assessment | Comment |
| C.1.5.1 | * Have you identified and developed your IT capacity for large numbers of staff to work remotely? | □ Yes □ No |  |
| C.1.5.2 | * Have you identified the necessary equipment including software required for your business to function day to day with most of your staff working from home? | □ Yes □ No |  |
|  | * Have you developed OHS checklists to work from home for staff? |  |  |
| C.1.5.3 | * Do you have a fireproof, crush-proof safe box to store (hard copy) critical documents? | □ Yes □ No |  |
| C.1.5.4 | * Have you compiled a list of your most critical information and documents (financial records, purchase orders, blank cheques, property and insurance records, governance papers, operation and procedures manuals, IT records and technical recovery plans, staff, contractor, consumer and supplier contact lists, general emergency contact number list etc) ? | □ Yes □ No |  |
| C.1.5.5 | * Do you have multiple back-ups of critical documents e.g have you scanned critical documents and stored these on a USB/hard drive, on the intranet, the cloud, or in password-protected section of your website? | □ Yes □ No |  |
| C.1.5.6 | * Have you kept documents on a USB/hard drive safely offsite of your business? | □ Yes □ No |  |
| C.1.5.7 | * Have you documented your organisation’s corporate knowledge or intellectual capital e.g have you documented who knows what about your services and processes? | □ Yes □ No |  |
| C.1.5.8 | * Have you made sure you could get this information if that person or persons were unavailable? Does anyone else has access to this information? Is the information written down, if yes where; do you have a succession plan? | □ Yes □ No |  |